2008 LIMITED LIABILITY CAMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L06000055489

1. Entity Name
YO SOY I AM, LLC

Principal Place of Business

10440 NIGHTENGALE DRIVE RIVERVIEW, FL 33569 Mailing Address

10440 NIGHTENGALE DRIVE RIVERVIEW, FL 33569

FILED Apr 30, 2008 08:00 AN Secretary of State



04272008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 20-5001838

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

MAYO, IVETTE S 10440 NIGHTENGALE DRIVE RIVERVIEW, FL 33569

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	e named entity submits this statement for the purpose of cha tions of registered agent.	nging its registered office or registered ag	ent, or both, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and tale if applicable	(NOTE: Registered Agent signature required when re	einstating) DATE
	E NOW!!! FEE IS \$138.75 y 1, 2008 Fee will be \$538.75		
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MAYO, IVETTE S 10440 NIGHTENGALE DRIVE RIVERVIEW, FL 33569		U00000937496 05/27/08-80050-023 143.75
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBES OR AUTHORIZED REPRESENTATIVE

4/27/08

313-383-7688

Daytime Phone #